Effective October 1, 2000										69	7	686	18
CLAIMS AS FILED - PART I (Column 1) (Column 2)								_	SMALL ENTITY TYPE			OTHE	R THAN ENTITY
TOTAL CLAIMS								RAT			7	RATE	FEE
F	OR			NUMB	ER FILED	NUMBER EXTRA			BASIC FI	355.0	, , , , , , , , , , , , , , , , , , ,	BASIC FEE	
Ī	OTAL CHARG	EABLE C	LAIMS	24	minus 20=	4			X8 9-	+-	OF	2000	72
IN	DEPENDENT	CLAIMS		4	4 minus:3 = ' _ /				X40=	 	- ` '	7	
M	ULTIPLE DEP	ENDENT	CLAIM	PRESENT	RESENT				A403	╬		X80⇒	200
* If the difference in column 1 is less than zero, enter "0" in column 2								,	+135=		OR	+270=	<u>. </u>
									TOTAL			TOTAL	862
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									CHAIL	ENTITY		OTHER	
⋖		α	AIMS		HIGH		(Column 3)	١,	SWIFE	ENTITY	OR	SMALL	ENTITY
AMERDMENT /		AF	aining Ter Dment		NUME PREVIO PAID I	USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE	-	RATE	ADDI- TIONAL
	Total	1.2	4	Minus	. 2	9	. —	11	X\$ 9=		OR	X\$18=	FEE
Ą	Independent	1	Ί.	Minus			· _	lt	X40=	 	-	X80=	
-	FIRST PRES	ENIAHO	N OF N	ULTIPLE D	EPENDENT	CLAIM				 	OR	~~~	<u> </u>
+135= OR +270=													
		•						A	TOTAL DDIT, FEE	:	OR	YOYAL ADDIT. FEE	i i i Ai' ·
-			mn 1)		(Colum		(Calumn 3)			. •			
AMENDMENT B		REMA	INING	3	MIGRE NUMB PREVIOU	ER	PRESENT EXTRA	١٢	RATE	ADDI- TIONAL] [RATE	ADDI- TIONAL
	Total	· 2	4	Minus	· · · ·	OR Y	:	-		FEE		-	FEE
	Independent	1. 7	Í	Minus	1 7	/			X\$ 9=		OR	X\$18=	•
-	FIRST PRES	NTATION	OF MI	JUTIPLE DE	PENDENT	LAIM		L	X40⇒	-	OR	X80=	
								Ŀ	+135=	٠	OR	+270=	
	`							AD	YOYAL OIT. FEE		OR A	YOTAL	
-	*	(Colum			(Column	2)	(Column 3)						•
		REMAI	VING R		HIGHES NUMBE PREVIOUS	R SLV	PRESENT EXTRA	Γ,	RATE	ADDI- TONAL	ſ	_	ADDI- IONAL
1	otal ;	AMENDI	MENT	Minus	PAID FO	-		\vdash		FEE	L	AAIE I	FEE.
1	ndependent		1	Minus				Ľ	(\$ 9=		OR	X\$18=	رجست
								1	(40=		OR	X80	一
+135-											\exists		
If the "Highest Number Previously Paid For UN THIS SPACE is less than 10 1/41													
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT, FEE ADDIT, FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
						10	A	U	n nas abbu	Anste por (u coint	in T,	I

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Application in the Control of the Co									Application or Docket Number						
	PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003														
			SMAL	i F	NTITY		OTHER	THAN							
CLAIMS AS FILED - PART I (Column 1) (Column 2)								TYPE			OR	SMALL			
TC	TAL CLAIMS						·	RAT	Έ	FEE	1	RATE	FEE		
FO	R		NUMBER FILED NUMB			ER EXT	RA	BASIC		385.00	ÓЯ	BASIC FEE	770.00		
то	TAL CHARGEA	BLE CLAIMS	24 minus 20=					XS:		OR	X\$18=				
IND	EPENDENT CL	AIMS	minus 3 =					X43=			OR	X86=			
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT				3	+145	 5=		OR	+290=			
• If the difference in column 1 is less than zero, enter "0" in column 2							2	TOTA		 					
THE CHICAGO AND									AL	L	OR	TOTAL			
11-3-05 (Column 1) (Column 2) (Column 3)								SMA	ш	ENTITY	OR	OTHER SMALL!			
AMENDMENT A	•	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID I	est Ber Busly	PRESENT EXTRA		,RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
4DME	Total	. 24	Minus	- 2	4	- Ø		X\$ 9	=		OR	X\$18=			
NE NE	Independent	· 4	Minus	••• £	7	= 12	<u> </u>	X43	=	-	OR	· X86=			
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-	-		·				
								+145			OR	+290=	~.		
·											OR	TOTAL ADDIT, FEE			
		(Column 1)		(Colum		(Colur	nn 3)								
ENT B		CLAIMS REMAINING AFTER AMENDMENT	-	HIGH NUMI PREVIO PAID	BER XUSLY	PRES EXT		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	•	Minus	**		=	-	X\$9	=		OR	X\$18=			
ME	Ind pendent	*	Minus	***		<u> - </u>		X43			OR	X86=			
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM			+145	_	•	OR	+290=			
								10				TOTAL	-		
								ADDIT. F	Œ		، ۱۰۰۱	ADDIT. FEE	· ·		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST										1		455		
NT C	REMAINING AFTER AMENDMEN		NUME PREVIO PAID		DUSLY EXTRA			RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
DMC	Total	•	Minus	**		-		X\$ 9	_	•	OR	X\$18=			
AMENDMENT	Independent	•	Minus	444		-		X43:	┥			X86=			
Ā	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDEN	CLAIM			A43	4		OR	∨ 00=	 		
	* If the intry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=			
	If the "Highest Nur	mber Previously Pa	uid For IN THI	S SPACE i	s less tha	in 20, en	nter "20." ·	ADDIT, F			OR	TOTAL ADDIT. FEE			
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.															